# FORM D RECEIVED SEP 1 8 2007

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### 07078100

FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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ļ	Prefix		Serial
1			

DATE RECEIVED

Name of Offering (check if this is	an amendment and name has changed, and indicate of	change.)			
Class A Units					
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☐ Rul	e 506  Section 4(6)  ULOE			
Type of Filing: New Filing	Amendment				
	A. BASIC IDENTIFICATION DATA				
<ol> <li>Enter the information requested about the</li> </ol>	e issuer				
Name of Issuer ( check if this is an am	endment and name has changed, and indicate change.	)			
MFR Partners V, LLC					
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)			
735 Lake Street East, Wayzata, MN	55391	612-605-0704			
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)			
(if different from Executive Offices)	PROCES				
Brief Description of Business	· 100E3	2ED			
Real Estate Investment	CED A				
(if different from Executive Offices)  Brief Description of Business  Real Estate Investment  SEP 2 4 2007					
	<b>77.</b>	•			
Type of Business Organization	HOMSO				
corporation	☐ limited partnership, already formed NANC!A	other (please specify): limited liability			
		company			
☐ business trust	limited partnership, to be formed				
	Month Year				
Actual or Estimated Date of Incorporation or Organization:  0 5 0 7					
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:					
	CN for Canada; FN for other foreign jurisdiction	) <u>D</u> E			

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et sec. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTIFE	CATION DATA					
2. Enter the information reque	ested for the follow	ing:						
		er has been organized within	= -					
<ul> <li>Each beneficial own of the issuer;</li> </ul>	er having the power	er to vote or dispose, or dire	ect the vote or disposition o	f, 10% or more of	a class of equity securities			
<ul> <li>Each executive office</li> </ul>	er and director of o	orporate issuers and of corp	orate general and managing	g partners of partner	rship issuers; and			
<ul> <li>Each general and ma</li> </ul>	Each general and managing partner of partnership issuers.							
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Manager			
Full Name (Last name first, if MFR-V MM, LLC	individual)	- 44444						
Business or Residence Addres	s (Number and St	reet, City, State, Zip Code)						
735 Lake Street East	, Wayzata, MN	55391						
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner			
Full Name (Last name first, if Marhula, Daren C.	individual)							
Business or Residence Addres	s (Number and St	reet, City, State, Zip Code)						
735 Lake Street East	, Wayzata, MN	55391						
Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last name first, if England, Brad F.	individual)							
Business or Residence Addres	s (Number and St	reet, City, State, Zip Code)						
735 Lake Street East	i, Wayzata, MN	55391						
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner			
Full Name (Last name first, if Donahoe, Mark T.	individual)			·····				
Business or Residence Addres	s (Number and St	reet, City, State, Zip Code)	************					
735 Lake Street East	t, Wayzata, MN	55391						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Business or Residence Addres	s (Number and St	reet, City, State, Zip Code)						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Business or Residence Addres	s (Number and Si	reet, City, State, Zip Code)	·	<del></del>				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)	100						
Business or Residence Address	ss (Number and St	reet, City, State, Zip Code)			1 T			
					<u></u>			

				В. 1	NFORMA'	TION ABO	UT OFFE	RING				
	Tion the Janu						:	ship offsuin	 		Ye	
1.	Has the issu	er sola, or c			o in Append					***************************************		
2.	What is the	minimum i					=				\$ 2	50,000*
2.	*May be	waived by t	he Manager	•								
3.	Does the off	fering perm	it joint own	ership of a s	single unit?.	***************************************			••••••	••••••	🗵	
4.	Enter the in sion or simi to be listed list the nam or dealer, yo	lar remuner is an assoc ne of the br	ration for so ciated perso oker or dea	licitation of n or agent ler. If mor	f purchasers of a broker e than five	in connection or dealer re(5) persons	on with sale egistered w to be listed	es of securit ith the SEC d are associ	ies in the of and/or with ated persor	ffering. If a th a state of	person r states, broker	
Full Nan	ne (Last name	e first, if ind	lividual)									
Business	or Residence	e Address (	Number and	d Street, Cit	y, State, Zip	Code)						
Name of	Associated E	Broker or De	ealer					<del></del>				
States in	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Ch	eck "All State	es" or checl	c individual	States)				•••••				All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Nan	ne (Last name	e first, if ind	lividual)									
Business	or Residence	e Address (	Number and	d Street, Cit	y, State, Zip	Code)		·				
Name of	Associated E	Broker or De	ealer									
States in	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
(Ch	eck "All State	es" or checl	c individual	States)								All States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
	ne (Last name			[ 111]	[01]				[]	(+)	[]	(21)
Dusiness	or Pasidona	a Address (	Numberon	d Street Cit	n State 7:-	· Codo						
Business	or Residence	e Address (	Number and	a Street, Ch	y, State, Zip	code)						
Name of	Associated E	Broker or D	ealer				·					
States in	Which Perso	n Listed Ha	s Solicited	or Intends to	o Solicit Pu	rchasers						
	eck "Ali State						,					All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	(MM) (UT)	[NY] [VT]	[NC] [VA]	[ND] [WA]	(OH) (WV)	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \subseteq \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Alread Sold
	Debt	\$	\$
	Equity		
	☐ Common ☐ Preferred	¥ <u></u>	<u> </u>
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify Class A Units)		\$ 7,500,000
	Total		\$ 7,500,000
		<u> </u>	+ <u> </u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amour of Purchases
	Accredited Investors		\$_7,500,000
	Non-accredited Investors		
	Total (for filings under Role 504 only)		<b>p</b>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security '	Sold
	Rule 505	<u></u>	\$
	· Regulation A		\$
	Rule 504		\$
1	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		• .
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	🛛	\$ <u>15,000</u>
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		s
	Total		\$15,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBI	ER OF INVESTORS, EXPENSES AND USE	OF PRO	OCEEDS		
	b. Enter the difference between the aggregate of and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Ouestion 4.a. This difference in	s the		\$ <u>7,485,000</u>	
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount estimate and check the box to the left of the est the adjusted gross proceeds to the issuer set in	unt for the purpose is not known, furnis imate. The total of the payments listed must	h an equal bove. F	Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees		□ <b>s</b>		□ <b>\$</b>	
	Purchase of real estate		□ \$		□ <b>\$</b>	
	Purchase, rental or leasing and installation o	f machinery and equipment	□ <b>\$</b>		□ <b>\$</b>	
	Construction or leasing of plant buildings an	d facilities	□ \$		□ s	
	Acquisition of other businesses (including the offering that may be used in exchange for the	ne value of securities involved in this			□ s	
	• •				<b>⋈</b> \$7,485,000	
			□ \$		□ s	
	Column Totals		□ <b>\$</b>		<b>∑</b> \$ 7,485,000	
	Total Payments Listed (column totals added	)		⊠ s_	7,485,000	
		D. FEDERAL SIGNATURE	•			
followin	ner has duly caused this notice to be signed by g signature constitutes an undertaking by the is its staff, the information furnished by the issuer	ssuer to furnish to the U.S. Securities and I	Exchange	<ul> <li>Commission</li> </ul>	n, upon written re-	
Issuer	(Print or Type)	Signature		Date		
MFR Partners V, LLC			$\rightarrow$	September 1, 2007		
Name	of Signer (Print or Type)	Title of Signer (Print or Type)				
Darer	n C. Marhula	Director of MFR-V MM, LLC, the Manager of the Issuer				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)